

Application Data Sheet**Application Information**

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| CD-ROM or CD-R: | None |
| Title:: | SYSTEMS AND METHODS FOR QUALIFYING EXPECTED LOSS DUE TO CONTINGENT DESTRUCTIVE HUMAN ACTIVITIES |
| Attorney Docket Number:: | 116168 |
| Total Drawing Sheets:: | 7 |
| Small Entity:: | Yes |

Applicant Information

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| Applicant Authority type:: | Inventor |
| Primary Citizenship Country:: | U.S. |
| Status:: | Full Capacity |
| Given Name:: | E. |
| Middle Name:: | DeVere |
| Family Name:: | HENDERSON |
| City of Residence:: | Arlington |
| State or Province of Residence:: | Virginia |
| Country of Residence:: | U.S.A. |

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|----------------------------------|---------------|
| Applicant Authority type:: | Inventor |
| Primary Citizenship Country:: | U.S. |
| Status:: | Full Capacity |
| Given Name:: | Timothy |
| Middle Name:: | P. |
| Family Name:: | COFFIN |
| City of Residence:: | Springfield |
| State or Province of Residence:: | Virginia |
| Country of Residence:: | U.S.A. |

Correspondence Information

Correspondence Customer Number:: 25944

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|---|---------------------|--------------------------------|----------------------|
| Domestic Priority Information | | | |
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| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
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| This Application is a | Non- Provisional of | 60/474,931 | 06/03/2003 |
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| Assignee Information | | | |
| | | | |
| Assignee Name:: | | RISK ASSESSMENT SOLUTIONS, LLC | |
| Street of mailing address:: | | 4600 South Four-Mile Run Drive | |
| | | Suite 910 | |
| City of mailing address:: | | Arlington | |
| State or Province of mailing address:: | | Virginia | |
| Country of mailing address:: | | U.S.A. | |
| Postal or Zip Code of mailing address:: | | 22204 | |
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